	her	Bassett Services, Inc	•
(NEW) WORKERS' COMPENSATION CLAIMS			
Workers' Compensation Claims		Fee per Claim	Explanation (if required)
Record Only	\$	50.00	
Medical Only	\$	170.00	
ndemnity	\$	1,095.00	
Fransition from Medical to Indemnity		N/A	
OPEN) WORKERS' COMPENSATION CLAIMS		1971	
	-		
Medical Only	5		
Indemnity	\$	395.00	
(NEW) GENERAL LIABILITY CLAIM			
Employer's Liability Claims		Fee per Claim	Explanation (if required)
Bodily Injury	\$	825.00	
Personal Injury	\$	825.00	
Property Damage	\$	395.00	
Medical Payment	\$	395.00	
(OPEN) GENERAL LIABILITY CLAIM			
3odily Injury	\$	395.00	
Personal Injury	\$	395.00	
Property Damage	\$	395.00	
NEW) AUTOMOBILE LIABILITY CLAIM			
Bodily Injury/Property Damage		\$825 /\$395	
Physical Damage	\$	325.00	
(OPEN) AUTOMOBILE LIABILITY CLAIM	-		
Bodily Injury/Property Damage	\$	395.00	
Physical Damage	\$	310.00	
(NEW) PUBLIC OFFICIAL LIABILITY CLAIM			
Public Official Liability	\$	1,970.00	
Employment Practice Liability	\$	1,970.00	
(OPEN) PUBLIC OFFICIAL LIABILITY CLAIM			
Public Official Liability	\$	1,970.00	
Employment Practice Liability	\$	825.00	
(NEW) PROFESSIONAL LIABILITY CLAIM	-		
Professional Liability	\$	1,970.00	
(OPEN) PROFESSIONAL LIABILITY CLAIM			-
Professional Liability	\$	495.00	
NEW) PROPERTY CLAIM			
Buildings	\$	710.00	
Personal Property	\$	710.00	
OPEN) PROPERTY CLAIM	-		
Buildings	\$	395.00	
Personal Property	\$	395.00	
Other Services		Fee per Claim	Explanation (if required)
Systems - Interface & Reporting	+		No fees associated with Reporting
Standard Reports	_	Included	Additional controls warranted to determi
Loss Control Services - Expenses (if required)	1		Additional controls warranted to determine scope of Loss Control Services
Rehabilitation Services - Expenses (if required)	1		scope of 2000 control bel rites
Conversion fee for data or transfer of claim files from	Ť.		
he previous third party administrator.	5	; -	Waived fee associated with Data Conversion
Medical Bill Fee Scheduling (Option A)		26%	
Medical Bill Fee Scheduling (Option B)			
Telephonic Nurse Case Management	\$	90.00	Medical Triage one time per file \$340 per clai
	- Ψ	20.00	(each 30 days).

(each 30 days).

		nagement Servic	es, Inc.
(NEW) WORKERS' COMPENSATION CLAIM		<b>C</b> 1 ·	Employed (fragming)
Workers' Compensation Claims		ee per Claim	Explanation (if required)
Record Only	\$	30.00	Per claim. Life of Contract
Medical Only	\$	155.00	Per claim. Life of Contract
Indemnity	\$	892.00	Per claim. Life of Contract
Transition from Medical to Indemnity	\$	700.00	Life of Contract
(OPEN) WORKERS' COMPENSATION CLAIM	4S		
Medical Only	Т	No Charge	
Indemnity		0	
,		No Charge	
(NEW) GENERAL LIABILITY CLAIM	_		
Employer's Liability Claims	F	ee per Claim	Explanation (if required)
Bodily Injury	\$	805.00	Per suffix
Personal Injury	\$	805.00	Per suffix
Property Damage	\$	464.00	Per suffix
Medical Payment	\$	318.00	
(OPEN) GENERAL LIABILITY CLAIM			
Bodily Injury		No Charge	
Personal Injury		No Charge	
Property Damage (NEW) AUTOMOBILE LIABILITY CLAIM		No Charge	
x /	6	070.00	D
Bodily Injury/Property Damage Physical Damage	\$ \$	870.00 318.00	Per suffix
(OPEN) AUTOMOBILE LIABILITY CLAIM	\$	518.00	
Bodily Injury/Property Damage	- T	No Change	
Physical Damage		No Charge No Charge	
(NEW) PUBLIC OFFICIAL LIABILITY CLAIN		ito chui ge	
Public Official Liability	\$	805.00	
Employment Practice Liability	\$	805.00	
(OPEN) PUBLIC OFFICIAL LIABILITY CLAI	M		
Public Official Liability	-	No Charge	
Employment Practice Liability		No Charge	
(NEW) PROFESSIONAL LIABILITY CLAIM			
Professional Liability	\$	805.00	
(OPEN) PROFESSIONAL LIABILITY CLAIM	1 7		
Professional Liability	1	No Charge	
(NEW) PROPERTY CLAIM			
Buildings	\$	642.00	Per suffix
Personal Property	\$	642.00	Per suffix
(OPEN) PROPERTY CLAIM			
Buildings		No Charge	
Personal Property		No Charge	
Other Services	F	ee per Claim	Explanation (if required)
Systems - Interface & Reporting	\$	175.00	Per hour, if progamming required
Standard Reports			Standard reports included in fees
Loss Control Services - Expenses (if required)	\$	179.00	Per hour. Large projects would be negotiated.
Rehabilitation Services - Expenses (if required)		At Cost	
Conversion fee for data or transfer of claim files fro	m	No Charge	
the previous third party administrator.		0	****
Medical Bill Fee Scheduling (Option A) Medical Bill Fee Scheduling (Option B)	\$	1.95 per line	*See proposal for pricing details* *See proposal for pricing details*
Medical Bin Fee Scheduning (Option B)			see proposarior pricing details
Telephonic Nurse Case Management	\$	95.00	Per hour. Large projects would be negotiated.

On-Site training charges - to include fees for: facilitation, travel, per diem, materials, etc.		Additional conversation warranted to determine scope.	
Performance Guarantees	Target	Penalty	
1. Implementation timeline completed by 10/1/2023			
2. Monthly Billing and Reports			
3. Customer Service			
a.Average Speed of Answer		Detail regarding performance guarantee	
b.Abandonment Rate		approach is included with the Cost & Terms	
c.Response to participant inquiry		document	
d.Resolution of participant inquiry			
4. Notification Timelines			
As specified by the County to include			
Initial Contact with employee			
Claims set-up/Notification			
•HR staff inquiries turnaround			
•HR staff notification of denied claims			
5. Provide Account Management Reports - Monthly			
6. Incurred penalties for failure to comply with			
statutory laws or admin regulations.			

On-Site training charges - to include fees for: facilitation, travel, per diem, materials, etc.	\$ 90.00	
Performance Guarantees	Target	Penalty
1. Implementation timeline completed by 10/1/2023	1-Oct-23	One-half of one percent of total annual fee
2. Monthly Billing and Reports	7th Day of the Month	1% of monthly billing
<ol> <li>Customer Service</li> <li>Average Speed of Answer</li> <li>Abandonment Rate</li> <li>c.Response to participant inquiry</li> <li>d.Resolution of participant inquiry</li> </ol>	Option available through 24/7 call center	TRISTAR will reimburse the County for failure to comply with statuatory laes or admin regulations
<ol> <li>Notification Timelines</li> <li>As specified by the County to include</li> <li>Initial Contact with employee</li> <li>Claims set-up/Notification</li> <li>HR staff inquiries turnaround</li> <li>HR staff notification of denied claims</li> </ol>	One (1) business day for setup, notification, and turnaround time.	1% of monthly billing
5. Provide Account Management Reports - Monthly	7th of the month	1% of monthly billing
6. Incurred penalties for failure to comply with statutory laws or admin regulations.	Throughout service period.	TRISTAR will reimburse the County for failure to comply with statuatory laes or admin regulations